STATE OF COLORADO REQUEST FOR REPLACEMENT BALLOT

Please note: This completed form MUST be returned by 7:00 p.m. on Election Day. If returning with your ballot, place this form in the return envelope, not in the secrecy sleeve.



VOTER INFORMATION (PLEASE PRINT):							
Last Name (Required)	First Name (Required)	Mic	Middle Initial		Previous Name of Applicant – If Applicable		
Colorado Legal Residence Str	reet Address (Required) – No P.O. Boxes	Apt/Unit #	City/Town	(Required)	State (Required)	Zip (Required)	
Mailing Address or P.O. Box – Required if different from residential ad		Apt/Unit #	City/Town	(Required)	State (Required)	Zip (Required)	
Date of Birth (Required)	Colorado Driver's License Number OR State Issued ID Number	Social Securi At Least the I	urity Number – e Last 4 digits		Telephone Number (Including Area Code)		
MM DD YYYY					() -		
REPLACEMENT BALL	OT INFORMATION:						
I am requesting a Replacement Ballot for the election because:							
☐ I did not receive the original ballot.			☐ I spoiled the original ballot.				
☐ I am personally rece	viving the ballot today.						
☐ Please mail the ballot to me at:							
Street	Apt/Unit #	City	City			State Zip	
READ, SIGN AND DATE:							
I swear or affirm that I am requesting the replacement ballot for the reasons stated above, that I have not voted the original ballot issued for the election indicated and I do not intend to vote at the election except by voting the replacement ballot.							
Signature or Mark (Required)							
XSignature (Required)			Date Signed (Required) / / MM DD YYYY				
IMPORTANT: Make sure to sign and date the Affidavit of Voter on your return envelope before returning your voted ballot. Your signature must be provided or your ballot cannot be counted pursuant to Colorado Law. (C.R.S. 1-8-304)							
Colorado Law requires that in order for your ballot to be counted, it must be received in the County Clerk's Office by 7:00 p.m. on Election Day.							
Postmarks do <u>NOT</u> count as receipt of the ballot.							
	FOR OFFICE	USE ONLY:					
Election Clerk:		Voter ID #:					
Original Ballot Pct & Sty	Replacement Ballot Pct & Style #:						
Original Ballot #:	Replacement Ballot #:						
Original Date Issued:		Replacement Date Issued:					